

**THINK COMMUNITIES**

*To:* **Communities and Partnership Committee**

*Meeting Date:* **17 December 2019**

*From:* **Adrian Chapman, Service Director: Communities and Safety**

*Electoral division(s):* **All**

*Forward Plan ref:*  *Key decision:* **No**

*Purpose:* **For the Committee to receive information relating to progress being made towards delivery of our Think Communities approach.**

*Recommendation:* **The Committee is recommended to:**

- a) Note and comment on the progress of the Think Communities approach; and**
- b) Make initial comments about the draft service delivery areas.**

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## **1. BACKGROUND**

- 1.1 The principles of Think Communities are now firmly established across the public sector in Cambridgeshire, and they signal a new way of working – between public sector partners, with the voluntary, community and faith sectors, and with and alongside communities. Think Communities seeks to change traditional approaches to public service delivery by developing place-based teams that are responsive to local, evidenced needs. It will enable a sharp focus to be established on the things that matter most within communities, and for services, projects and programmes to be designed to best suit local need.
- 1.2 Think Communities is a new way of working – it is not a project or a programme with a limited lifespan, but instead aims to rethink the traditional ways we have collectively sought to address some of the biggest issues and take some of the biggest opportunities within our communities. Think Communities recognises that a place-based approach is best, rather than the current thematically-focussed service delivery arrangements: it is based on a model which creates the most appropriate teams to be based within and alongside our communities that can best respond to service demands, and find sustainable ways of tackling inequality.
- 1.3 The development of the Think Communities approach continues to be a collaborative one, and the launch this month of the new Think Communities Partnership Board signals another key milestone being reached. There is significant energy and enthusiasm across our partnerships to embrace the principles of Think Communities and to work differently.
- 1.4 This report provide the latest progress report and builds on previous Committee reports.

## **2. MAIN ISSUES**

### **2.1 Overall Progress**

- 2.1.1 The Committee will be aware, from previous reports, that significant effort has been made in securing the hearts and minds of colleagues within our own organisation as well as those from right across the public sector. The Think Communities place-based, person-centred approach is now agreed as the best way to work together in response to the challenges our sector faces, most notably the increasing demand for our services. Think Communities is not a project or a programme, but is instead a way of working which will require significant cultural and behavioural change if it is to have the impacts we require. The investment made in securing the support of our public sector partners prior to significant roll-out has been a key element in establishing a solid foundation from which to build.
- 2.1.2 The Cambridgeshire Public Services Board (CPSB), which comprises the chief executives (and equivalents) from the county council, all district councils, the Clinical Commissioning Group, the Greater Cambridge Partnership, Police and Fire Service, has agreed to provide the strategic oversight and leadership required to truly embed Think Communities across and within their organisations. Although there is an agreement to provide a formal report to the CPSB each quarter, it is likely that we will

follow the current pattern of providing a report at every CPSB meeting (currently around every 6-8 weeks).

- 2.1.3 The new Think Communities Partnership Board held its inaugural meeting on 2 December 2019; this Board will drive the delivery, at pace, of the Think Communities approach, unblocking issues or challenges and identifying opportunities wherever relevant. Membership mirrors that of the CPSB, but also includes voluntary sector representation via Hunts Forum, Peterborough Council for Voluntary Service, and Healthwatch. All parts of the health system are also represented, via representatives of the North and South Alliances of NHS and social care providers.
- 2.1.4 At District Council level, productive discussions have continued with our council partners relating to the ways in which they would like to oversee Think Communities activity at the local level:
- Huntingdonshire – have formed a local Think Communities Delivery Board, which will ensure the creation of a shared local delivery plan, create the right arrangements for data sharing, and will implement local delivery projects and interventions that meet local need
  - Fenland – are focussing initial activity in Wisbech, building on the many existing projects and programmes that are operating in the town. At the core of this approach will be the creation of an early help hub in Wisbech, housing partners from across the public, voluntary and community sectors, and which will be a referral point for anybody who may benefit from or need the earliest possible preventative intervention. It will be non-subject specific, and so will take referrals relating to any issue of concern
  - Cambridge City – are focussing initial activity on a series of local delivery programmes, including those in the Southern Fringe and Abbey Ward. Cambridge City already have a strong set of governance arrangements in place, including an effective community safety partnership and neighbourhood committees, and the intention is to build on this existing network
  - East Cambridgeshire – are also focussing initial activity on some key local delivery projects, including some transformational work in Littleport alongside the parish council
  - South Cambridgeshire – are very actively engaged in range of Think Communities-related approaches, including the development of their community navigator roles, and work with the Granta group of GP practices. Their next priority is to engage with their Members

For information, Peterborough is replicating the approach being taken forward in Huntingdonshire.

- 2.1.5 Think Communities seeks to respond at a local level to evidenced demand, and it is therefore vital that we establish recognised Think Communities service delivery areas and a framework through which data and intelligence can be shared and analysed in order to provide the evidence we need. Of at least equal importance is the requirement to create new ways to engage with citizens, working with them to build their own capacity and resilience, to support themselves and each other, and to help us to refine the priorities that the evidence suggests we should focus on. It is this range of important work that the Think Communities teams have been focussing on in recent months.

## 2.2 Thematic Progress

2.2.1 In previous reports, we have updated on the workstreams that are being delivered as part of the Think Communities approach:

1. Strategic Leadership
2. Communications
3. Community Engagement
4. Data and Intelligence
5. Community Assets
6. Funding and Resources
7. Workforce Reform

2.2.2 As mentioned above, we have invested significant time to date in securing the hearts and minds support of our partners, and we are now moving rapidly into delivery of positive change through Think Communities at the local level. To sharpen up even further this focus on delivery, the key themes being focussed on at present are:

1. Communications and Community Engagement
2. Data and Intelligence
3. Workforce Reform

These workstreams were also identified by partners at the Think Communities Partnership Board meeting as the most critical to the next stage of delivery

Strategic leadership continues to be provided through both this Committee and the Communities and Safety service directorate, as well as via the CPSB, although the new Partnership Board described above will also become an integral part of this approach.

Additionally, the community assets workstream is being driven forward through the Cambs 2020 Community Hubs work, and is responding to the emerging priorities identified with our partners as part of Think Communities. An overview of progress made against this priority is included later in this report.

### 2.2.3 Communications and Community Engagement

Throughout the summer months, we engaged with citizens across the county as part of the Think Communities Challenge, which sought to identify what mattered most to residents, what they thought the council and partners should focus on, and what they could do for themselves. The headline results, which are shown below, will be used to shape and inform the development of the local delivery plans:

- The top 5 things the community should put their effort into:
  - to live in an area with good community spirit
  - to have enjoyable activities to do together, and not be lonely
  - children and young people to have fun
  - to live in a clean, green area, free of rubbish
  - to be part of a community, and feel valued whatever our differences

- The top 2 things an individual should put their effort into:
  - to be part of a community, and feel valued whatever our differences
  - for people to prepare for the future as they get old
- The top 1 thing the public sector should put their effort into:
  - for children and old people to be protected from danger

Think Communities also formed the key theme of the recent Local Councils Conference, at which delegates were briefed on the approach, and ways to engage with parish and town councils through the Think Communities approach began to be explored. This collaboration with parish and town councils is a key requirement of Think Communities going forwards, and a number of follow-up meetings with delegates have been or will be held to explore how this will work at the local level.

Our NHS colleagues are currently consulting with residents as part of the Big Conversation (<https://www.cambridgeshireandpeterboroughccg.nhs.uk/get-involved/the-big-conversation/>). The Big Conversation seeks to identify the priorities that our citizens have regarding health resources and funding choices. As key partners in the Think Communities approach, the data collected through exercises such as this provide real opportunities to share learning and agree joined-up responses and funding choices.

#### 2.2.4 Data and Intelligence

The data and intelligence workstream is fundamental to the success of Think Communities. If we are to make the scale of positive change we seek to make, it is vital that our place-based delivery plans and priorities are informed by data and intelligence that is shared between all Think Communities partners, including communities. This workstream is seeking to:

- understand barriers to data sharing and put in place effective governance procedures to resolve those barriers
- use data to better understand demand at a local level and inform service delivery
- develop a single view of place

Alongside the work to define service delivery areas using data and intelligence (described below), this workstream has also been focussing on the creation of area profiles. These can be rapidly finalised as soon as the service delivery areas are agreed.

The structure of the area profiles has been established, making initial use of pre-existing information already held within the Cambridgeshire Insight data store – this includes topics relating but not limited to:

- Population including gender split
- Age group breakdown estimates and comparison to county and England
- Ethnicity and nationality
- Economically active population by gender
- Benefit claimant count

- Number of properties, proportion that are overcrowded, average household size
- Tenure, household size
- Educational attainment
- Deprivation
- Number of crimes, rate and types
- Self-reported health limiting conditions, including respiratory diseases, long term conditions, mental health and obesity
- Vehicle ownership
- Births and life expectancy

As the area profile work progresses, more and more information will be added, including details of public sector spend in each service delivery area. The profiles will seek to help our system to:

- Understand what demand challenges there are across particular communities / localities **(Segmentation)**
- Be informed about what the system could do collaboratively to meet the immediate needs of individual communities **(Utilisation)**
- Understand the future risks and needs of communities / localities **(Stratification)**

#### 2.2.5 Workforce Reform

If we are to truly transform the way we work with and alongside our communities, our workforce needs to be equipped with the skills, knowledge and confidence to operate differently. Taking inspiration from the Neighbourhood Cares pilots, where social care staff were supported to work very differently and to find the best ways to resolve challenges even if they were less traditional than the norm, we need our staff to become part of the community they are based within, forming close and effective relationships with, for example, citizens, local councillors, town and parish councils, community groups and organisations, and public sector partners. We need our staff to find creative and flexible solutions to some of the entrenched challenges our communities face, thereby improving outcomes and, in so doing, preventing or delaying demand for services. We also need our staff to find and pursue opportunities, and to adopt strengths-based approaches to engaging with and working within communities.

To signal this change of approach, we are developing a workforce development programme that will see all public sector workers, at all levels, being immersed in the Think Communities approach. The current proposal is to develop a generic, half-day induction session for all staff which will run from libraries across the county on an ongoing basis. The induction sessions will contain generic information about Think Communities and the opportunities it brings to our staff to work differently, as well as being nuanced to the locality within which the staff being inducted are based. These sessions will run on a monthly basis and will continue for as long as necessary, with the sessions eventually being delivered by our own workforce.

In addition, we are developing a more thematic set of workforce development opportunities, to ensure that, where relevant, our staff develop a greater understanding of the wide range of issues that they will come across as part of their roles. This will include, for example, training and awareness raising relating to safeguarding, Prevent, hate crime, housing and homelessness, community engagement, and skills.

We have been running a set of discreet pilots to test and assess Think Communities approaches, and the learning from these as well as the Neighbourhood Cares pilots will inform the design of the workforce development programme.

## **2.3 Service Delivery Areas and Community Assets**

2.3.1 As described above, the community assets workstream, which forms part of the overall Cambs 2020 programme, will need to respond to the emerging needs and priorities identified within communities. Although the initial focus is on ensuring the council can successfully vacate the Shire Hall site, the emphasis placed on assets by Think Communities is very much centred on ensuring the right balance of staff and services are based within communities right across our county where they are needed most.

2.3.2 The maps attached at **Appendices 1-5** (key in **Appendix 7**) show the emerging community hubs that have been identified through the Cambs 2020 programme, and which will serve as part of the Think Communities approach. The details of where these assets are and how they will be used continues to be refined, and the maps serve as a position statement at this time, against which Member comments are warmly welcomed. Linked to this, and for information, the previously proposed investment into some of our council-owned buildings that was recommended for approval by this Committee has subsequently been approved by General Purposes Committee. Officers will be engaging direct with Members over the coming weeks, division by division, to share more detailed information about assets and the links to Think Communities, as well as to refine the initial service delivery areas.

2.3.3 A significant part of our place-based Think Communities approach is to identify and agree our service delivery areas – the geographical places within which our services, data and delivery plans will be aligned. We currently have a number of different boundaries – e.g. parish, division, ward, district, health, policing etc. Services between some of these boundaries often differ, making it difficult for communities to navigate or engage with, and Think Communities therefore provides the opportunity to agree a common set of boundaries across the system, that are:

- as natural as possible
- organised in a way that make sense to our citizens
- of the optimum size to have the biggest impact
- able to make the most of collective assets and resources, helping services to be affordable and sustainable
- respectful of boundaries defined by our partners

As the Committee knows, we have worked closely over the past few months with our colleagues in the health system, to define and agree the Primary Care Network (PCN) areas. PCN's represent collections of GP practices who have agreed to work together

as part of new NHS England contractual arrangements. It was agreed that these would, where possible, form the basis of defining what a cross-system, mutually agreed set of service delivery areas would be, which were both sensible and effective.

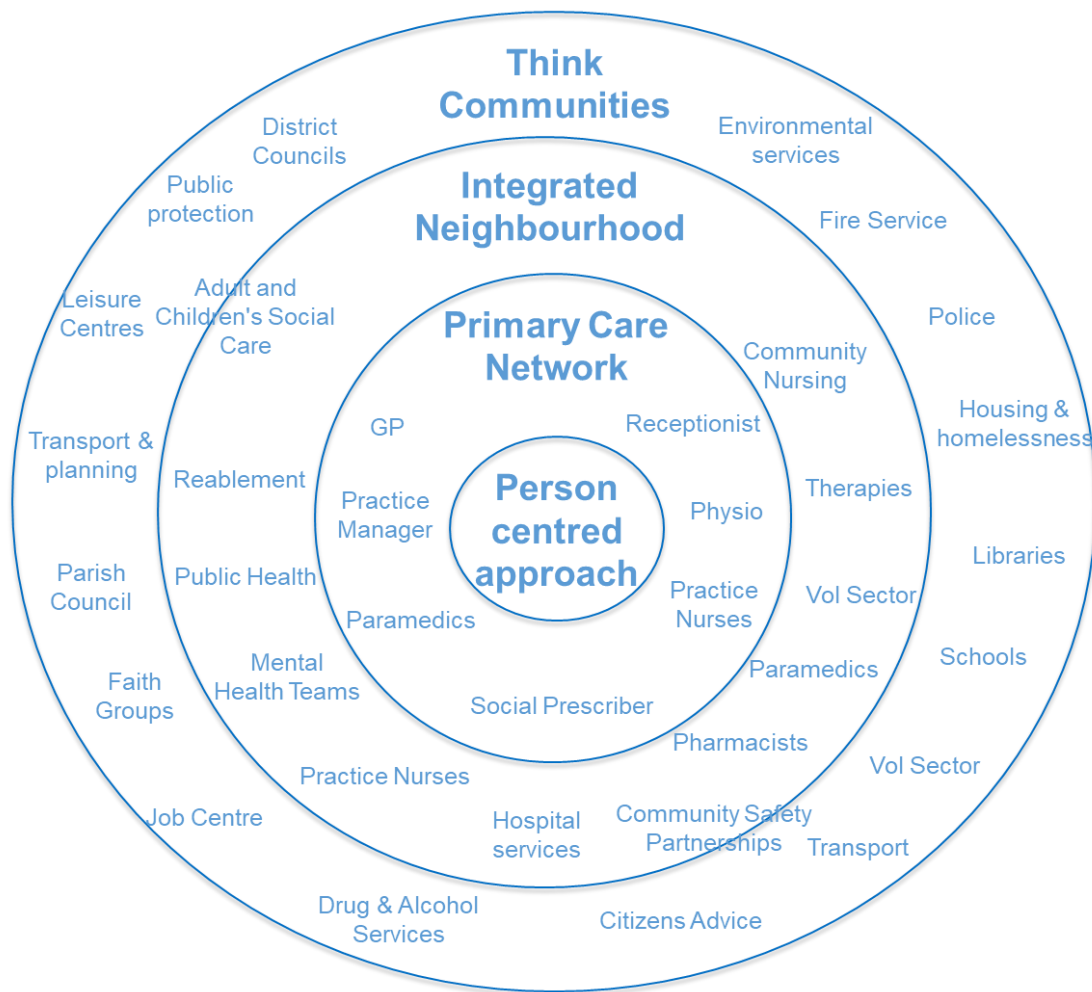
Although there are a number of approaches that could be taken to identify what an area **might** look like based on the Primary Care Networks, the approach taken was to group the PCN's and identify potential boundaries based on which Lower Super Output Areas\* had the highest registered patient population – this is known as Dominant Lower Super Output Areas (LSOA's).

Dominant Lower Super Output Areas take into account the proportion of each LSOA's residential population who is registered at a GP within each PCN. This was utilised to ensure potential Think Communities service delivery areas are as sympathetic and aligned as best as possible to PCN's to support integrated approaches to service delivery, particularly with our health partners.

*\* **Lower-Layer Super Output Areas (LSOA's)** are small areas designed to be of a similar population size, with an average of approximately 1,500 residents or 650 households. There are 32,844 Lower-layer Super Output Areas (LSOA's) in England. They were produced by the Office for National Statistics for improving the reporting of small area statistics and are a standard way of dividing up the country. For ease of communication, LSOA's are sometimes referred to as 'neighbourhoods' or 'small areas'*

- 2.3.4 In Cambridgeshire's case, the joining-up of the development of the PCN's with our Think Communities approach has enabled some ambitious shared plans to emerge around service delivery. Our health partners have developed an integrated neighbourhoods model of service delivery, which forms part of our broader Think Communities approach. The diagram below illustrates the type and nature of services that fall within this overall system-wide, place-based approach:





- 2.3.5 The PCN arrangements have now been agreed by NHS England, although are likely to change and adapt over the coming years in response to changes at a local level. The Think Communities team have concurrently reviewed the GP catchment areas and patient footfall, and overlaid that information with other data about our places, including what might constitute a more natural community boundary through the eyes of our citizens. This has resulted in the proposal to create a number of Think Communities service delivery areas, as illustrated at **Appendix 6**. Each area comprises a number of Lower Super Output Areas, which enables detailed data to be shared and analysed at a macro level (whole Service Delivery Area), a micro level (LSOA), or somewhere in between (groups of LSOA's).
- 2.3.6 Officers will be discussing the proposed areas with colleagues across the public sector system, and with Members, to ensure that a final set of areas can be agreed. In the spirit of Think Communities, it will be important that these areas remain flexible, especially where communities themselves show a desire or need to work with others beyond their Think Communities-defined areas.

- 2.3.7 In addition to the assets described above in each Service Delivery Area, the county council and health partners are forming a core team of place-based staff, as follows:
- Think Communities Co-ordinators (5 posts, one for each District Council area)
  - Social Prescribing Link Workers – at least one worker for each PCN area
  - Integrated Neighbourhood Managers – one worker for each PCN in both Fenland Huntingdonshire

In addition, existing place-based staff from, for example, district councils or the police will also work as part of the core team approach.

The role of this core team will be to provide the links between the citizen and the public sector, to help identify ways to support alternatives to sometimes inappropriate statutory interventions, to build resilience and capacity within communities, and to drive collaboration at a local level, across the system, in response to the locally agreed priorities and delivery plans.

## 2.4 Place-Based Pilots

- 2.4.1 To support the rapid development of Think Communities, a number of place-based pilots have been running over the past few months. These include:
- **North Huntingdon** – where partners and citizens are working collaboratively to understand the data and root causes of need to help inform their decision making as to how they, together, improve the outcomes in the area
  - **Wisbech** – building on the approaches being taken as part of the Wisbech 2020 programme, some dedicated work is underway to create an early help hub, to be based at the Boathouse, where partners can work collaboratively to prevent demand and escalation of need through far earlier engagement or intervention
  - **Cambridge Southern Fringe** – where the current assumptions made around new communities and increased demand are being properly investigated to inform the level of service provision needed in future growth areas
  - **Littleport** – where partners are working closely with the parish council to manage ASB and promote health and wellbeing
  - **The Ortons in Peterborough** – building on the Peterborough-wide Integrated Communities programme, work is exploring the sense of place and the role communities have. This is based on preventing the ‘broken window’ theory
  - **Integrated Neighbourhood Areas** – three PCN areas have been identified as accelerator sites – Granta, Wisbech and Peterborough. These sites will drive forward place based working through the Integrated Neighbourhood work as part of the Think Communities agenda
- 2.4.2 The Neighbourhood Cares pilots in Soham and St Ives have also been instrumental in supporting the thinking and design of the Think Communities approach. At the December 2019 meeting of the Adults Committee, a report on the evaluation of the Neighbourhood Cares pilots in Soham and St. Ives will be discussed. The Neighbourhood Cares pilots provide huge amounts of evidence and experience that we are able to use to develop our Think Communities approach. We are now in the process of ensuring this learning is embedded into our Think Communities model, thereby expanding both the geographical coverage of the Neighbourhood Cares work, and the thematic coverage, under the umbrella of Think Communities.

A short film will be shown at the Communities and Partnership Committee meeting, summarising the impacts achieved by Neighbourhood Cares and discussing the natural transition into Think Communities.

- 2.4.3 We have also been in discussion with our Commissioning service directorate colleagues, primarily to determine the ways in which our commissioning practice can be channelled via libraries, in support of our new Libraries and Communities vision. These discussions have led to an agreement to pilot a radical new approach to commissioning preventative services, using the Think Communities place-based, person-centred model. It is proposed that commissioning spend will be capitated to a local level, with choice over how best to commit that investment resting with the local Think Communities partners.

This approach, which could see significant sums moving into a set of local commissioning arrangements, will be worked up over the next few weeks, with further detail being brought back to Committee.

## **2.5 Next Steps**

- 2.5.1 The priority actions for the coming weeks (January to March) are as follows:
- Finalisation of the Think Communities service delivery areas
  - Production of the area profiles
  - Appointment (where necessary) and/or confirmation of place-based core team members
  - Development and launch of the workforce development programme
  - Development and delivery of the new commissioning approach in pilot areas across Cambridgeshire
  - Strengthening the relationship with our voluntary, community and faith sector partners, and also our parish and town council colleagues

## **3. ALIGNMENT WITH CORPORATE PRIORITIES**

### **3.1 A good quality of life for everyone**

The Think Communities approach aims to improve outcomes for all of our citizens and communities, as well as to prevent and delay demand for statutory interventions.

### **3.2 Thriving places for people to live**

The Think Communities approach is a place-based model of service design and delivery, closing the gap between public services and citizens. A significant element of this approach is to ensure a positive sense of place is established across Cambridgeshire, where people feel connected and proud, and can achieve what they aspire to achieve.

### **3.3 The best start for Cambridgeshire's Children**

Communities that are strong, resilient and cohesive, supported by a broad range of services and opportunities, provides the best opportunities for the whole population to succeed and for us and our partners to enable improved outcomes.

## **4. SIGNIFICANT IMPLICATIONS**

### **4.1 Resource Implications**

There are no significant implications within this category at this stage. It is anticipated that the Think Communities approach will make more effective use of existing mainstream spend in an area first and foremost to deliver its aims.

### **4.2 Procurement/Contractual/Council Contract Procedure Rules Implications**

There are no significant implications in this category.

### **4.3 Statutory, Legal and Risk Implications**

There are no significant implications in this category.

### **4.4 Equality and Diversity Implications**

The Think Communities approach seeks to ensure that all of our communities have access to the most appropriate services and opportunities, regardless of their circumstances.

### **4.5 Engagement and Communications Implications**

There are no significant implications in this category.

### **4.6 Localism and Local Member Involvement**

The Think Communities approach embeds the principles of localism at the heart of public service delivery. The role of elected Members in supporting this approach and helping connect citizens to services is fundamental.

### **4.7 Public Health Implications**

Public Health colleagues are core to the design and delivery of the Think Communities approach, and it is imperative that the approach supports our efforts to continue to drive improvement across the Public Health Outcomes Framework.

<b>Implications</b>	<b>Officer Clearance</b>
<b>Have the resource implications been cleared by Finance?</b>	Yes Name of Financial Officer: Emma Jones
<b>Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by the LGSS Head of Procurement?</b>	N/A
<b>Has the impact on statutory, legal and risk implications been cleared by LGSS Law?</b>	N/A
<b>Have the equality and diversity implications been cleared by your Service Contact?</b>	Yes Name of Officer: Adrian Chapman
<b>Have any engagement and communication implications been cleared by Communications?</b>	N/A
<b>Have any localism and Local Member involvement issues been cleared by your Service Contact?</b>	Yes Name of Officer: Adrian Chapman
<b>Have any Public Health implications been cleared by Public Health</b>	N/A

<b>Source Documents</b>	<b>Location</b>
None	N/A